| Effective October 1, 2003  [1917]   |  |   |                  |                                   |              |                  |        |                       |                        |         |                     |                        |  |
|---|--|---|------------------|-----------------------------------|--------------|------------------|--------|-----------------------|------------------------|---------|---------------------|------------------------|--|
| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |   |                  |                                   |              |                  |        | SMALL ENTITY OTHER TI |                        |         |                     |                        |  |
| TOTAL CLAIMS  |  |   | 6                |                                   |              | · <u> </u>       |        | RATE                  | FEE                    | 7       | RATE                | FEE                    |  |
| FOR   |  |   | NUMBER FILED     |                                   | NUMBER EXTRA |                  |        | BASIC FE              | E 385.00               | ÖR      | BASIC FEE           | 770.00                 |  |
| TOTAL CHARGEABLE CLAIMS   |  |   | 6 minus 20=      |                                   | * &          |                  |        | X\$ 9=                | _                      | OR      | X\$18=              |                        |  |
| INDEPENDENT CLAIMS  |  |   | ( minus 3 =      |                                   | * 6          |                  |        | X43=                  | 1-                     | OR      | X86=                |                        |  |
| ML  | JLTIPLE DEPEN                                  | NDENT CLAIM P                             | RESENT           |                                   |              |                  |        | +145=                 |                        | OR      | +290=               |                        |  |
| * If the difference in column 1 is less than zero, enter "0" in column  |  |   |                  |                                   |              |                  | ļ      | TOTAL                 | 131                    | OR      | TOTAL               |                        |  |
| CLAIMS AS AMENDED - PART II   |  |   |                  |                                   |              |                  |        |                       | OTHER THAN             |         |                     |                        |  |
|   | ,  | (Column 1)                                |                  | (Colun                            |              | (Column 3)       | SMAL   |                       | ENTITY                 | OR      | SMALL               | ENTITY                 |  |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                  | HIGHI<br>NUME<br>PREVIO<br>PAID F | BER<br>OUSLY | PRESENT<br>EXTRA |        | RATE                  | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | *   | Minus            | **                                |              | =                |        | X\$ 9=                |                        | OR      | X\$18=              |                        |  |
|   | Independent                                    | *<br>ENTATION OF MI                       | Minus            | ***                               | CL AINA      | =                |        | X43=                  |                        | OR      | X86=                |                        |  |
|   | FIRST PRESE                                    | INTATION OF INIC                          | DETIPLE DEF      | PENDENT                           | CLAIIVI      |                  | 1      | +145=                 |                        | OR      | +290=               |                        |  |
| <b>.</b>  |  |   |                  |                                   |              |                  |        | TOTAL<br>ADDIT. FEE   |                        | OR      | TOTAL<br>ADDIT. FEE |                        |  |
|   |  | (Column 1)                                |                  | (Colum                            | nn 2)        | (Column 3)       | _ ^    | ADDII. FEE            | <u></u>                | • ′     | 10011.TEC           |                        |  |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                  | HIGHE<br>NUME<br>PREVIO<br>PAID F | BER<br>JUSLY | PRESENT<br>EXTRA |        | RATE                  | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | *   | Minus            | **                                |              | =                |        | X\$ 9=                |                        | OR      | X\$18=              |                        |  |
|   | Independent                                    | *   | Minus            | ***                               | CL AINA      | =                |        | X43=                  |                        | OR      | X86=                |                        |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                  |                                   |              |                  |        |                       |                        | OR      | +290=               |                        |  |
|   |  |   |                  |                                   |              |                  |        |                       |                        | OR ,    | TOTAL<br>ADDIT. FEE | :                      |  |
|   |  | (Column 1)                                |                  | (Colum                            |              | (Column 3)       |        | <i>:</i>              |                        |         |                     |                        |  |
| AMENDMENT C   | `  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                  | HIGHE<br>NUMB<br>PREVIO<br>PAID F | ER<br>USLY   | PRESENT<br>EXTRA |        | RATE                  | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | *   | Minus            | ** .                              |              | =                |        | X\$ 9=                |                        | OR      | X\$18=              |                        |  |
|   | Independent                                    | *   | Minus            | ***                               |              | =                |        | X43=                  | ·                      | OR      | X86=                |                        |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                  |                                   |              |                  |        |                       |                        |         | 000                 | -                      |  |
| * If the entry in column 1 is less than the ntry in column 2, write "0" in column 3.  |  |   |                  |                                   |              |                  |        |                       |                        | OR [    | +290=<br>TOTAL      |                        |  |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |                  |                                   |              |                  |        |                       |                        |         |                     |                        |  |
| _ 1   | The "Highest Num                               | ber Previously Paid                       | I For" (Total or | Independer                        | nt) is the   | highest number   | r four | nd in the ap          | propriate box          | in colu | ımn 1.              |                        |  |

Application or Docket Number